

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Erie Indemnity Company PAC-Federal

ADDRESS (number and street)

100 Erie Insurance Place

☐ Check if different than previously reported. (ACC)

Erie

PA

16530

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00153577

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☒ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
01 01 2013

through

M M M / D D D / Y Y Y Y Y Y
03 31 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Gary D. Veshecco

Signature of Treasurer

Gary D. Veshecco

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
04 04 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only

FEC FORM 3X

Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Erie Indemnity Company PAC-Federal

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
01 / 01 / 2013 To: M M / D D / Y Y Y Y Y Y
03 / 31 / 2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2013		147313.68
(b) Cash on Hand at Beginning of Reporting Period.....	147313.68	
(c) Total Receipts (from Line 19)	21071.49	21071.49
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	168385.17	168385.17
7. Total Disbursements (from Line 31)	5150.00	5150.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	163235.17	163235.17
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Erie Indemnity Company PAC-Federal

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		0	1		2	0	1	3		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3		3	1		2	0	1	3		

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	14803.84	14803.84
(ii) Unitemized	6267.65	6267.65
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	21071.49	21071.49
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	21071.49	21071.49
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	21071.49	21071.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	21071.49	21071.49

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	5000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	150.00	150.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5150.00	5150.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5150.00	5150.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	21071.49	21071.49
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21071.49	21071.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Erie Indemnity Company PAC-Federal

Full Name (Last, First, Middle Initial)

A. George D. Dufala

Mailing Address 289 NIAGARA POINT DR

City State Zip Code
 ERIE PA 16507-2321

FEC ID number of contributing federal political committee.

C

Name of Employer

Erie Insurance Group

Occupation

EVP, Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 12 2013

Transaction ID : 4689653

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

B. William Matrogran

Mailing Address 4726 PARKWOOD DR

City State Zip Code
 ERIE PA 16510-6320

FEC ID number of contributing federal political committee.

C

Name of Employer

Erie Insurance Group

Occupation

VP, Claims Learning & Dvlp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

433.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 19 2013

Transaction ID : 4701212

Amount of Each Receipt this Period

433.00

Full Name (Last, First, Middle Initial)

C. James Horvat Jr.

Mailing Address 5403 HEIDT AVE

City State Zip Code
 ERIE PA 16509-3032

FEC ID number of contributing federal political committee.

C

Name of Employer

Erie Insurance Group

Occupation

VP, Field Claims Srvc & Sprr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 26 2013

Transaction ID : 4710874

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

2733.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Erie Indemnity Company PAC-Federal

Full Name (Last, First, Middle Initial)

A. Karen A. Rugare

Mailing Address 141 E 37TH ST

City
ERIE

State
PA

Zip Code
16504-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer
Erie Insurance Group

Occupation
VP, Strategic Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2013

Transaction ID : PR39010244827

Amount of Each Receipt this Period

210.00

P/R Deduction (\$60.00 Monthly)

Full Name (Last, First, Middle Initial)

B. James P. Stoik

Mailing Address 7 NIAGARA PIER

City
ERIE

State
PA

Zip Code
16507-2305

FEC ID number of contributing
federal political committee.

C

Name of Employer
Erie Insurance Group

Occupation
VP, Internal Audit

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.33

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2013

Transaction ID : PR39010424827

Amount of Each Receipt this Period

294.33

P/R Deduction (\$85.88 Monthly)

Full Name (Last, First, Middle Initial)

C. Robert W McNutt

Mailing Address 5452 MYSTIC RDG

City
ERIE

State
PA

Zip Code
16506-7036

FEC ID number of contributing
federal political committee.

C

Name of Employer
Erie Insurance Group

Occupation
VP & Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2013

Transaction ID : PR39018204827

Amount of Each Receipt this Period

360.00

P/R Deduction (\$110.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

864.33

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Erie Indemnity Company PAC-Federal

Full Name (Last, First, Middle Initial)

A. Joseph M. Vahey

Mailing Address 7065 SANDY TRL

City State Zip Code
 ERIE PA 16510-5963

FEC ID number of contributing federal political committee.

C

Name of Employer Occupation
 Erie Insurance Group VP & Product Manager (Prsl)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2013

Transaction ID : PR39018454827

Amount of Each Receipt this Period

420.00

P/R Deduction (\$120.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Sheryl A Rucker

Mailing Address 3500 DUNN VALLEY RD

City State Zip Code
 ERIE PA 16509-4310

FEC ID number of contributing federal political committee.

C

Name of Employer Occupation
 Erie Insurance Group Sr Counsel-Insurance Oprs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

517.69

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2013

Transaction ID : PR39018534827

Amount of Each Receipt this Period

517.69

P/R Deduction (\$150.94 Monthly)

Full Name (Last, First, Middle Initial)

C. Melvin L. Hirst

Mailing Address 5820 FOREST XING

City State Zip Code
 ERIE PA 16506-7004

FEC ID number of contributing federal political committee.

C

Name of Employer Occupation
 Erie Insurance Group VP, Sales Promotion & Agcy Rel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2013

Transaction ID : PR39020754827

Amount of Each Receipt this Period

280.00

P/R Deduction (\$80.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1217.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Erie Indemnity Company PAC-Federal

Full Name (Last, First, Middle Initial)

A. Diane M Stamatelatos

Mailing Address 12147 JAMES JACK LN

City
CHARLOTTE

State Zip Code
NC 28277-3752

FEC ID number of contributing
federal political committee.

C

Name of Employer
Erie Insurance Group

Occupation
VP, Strategic Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2013

Transaction ID : PR39021584827

Amount of Each Receipt this Period

245.00

P/R Deduction (\$70.00 Monthly)

Full Name (Last, First, Middle Initial)

B. David L Bauer

Mailing Address 1963 ROCK CRK

City
AKRON

State Zip Code
OH 44333-4753

FEC ID number of contributing
federal political committee.

C

Name of Employer
Erie Insurance Group

Occupation
VP, Field Life Sales Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2013

Transaction ID : PR39023114827

Amount of Each Receipt this Period

350.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Gary D. Veshecco

Mailing Address 845 W TOWNHALL RD

City
WATERFORD

State Zip Code
PA 16441-4131

FEC ID number of contributing
federal political committee.

C

Name of Employer
Erie Insurance Group

Occupation
SVP, Law & Privacy Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2013

Transaction ID : PR39023224827

Amount of Each Receipt this Period

700.00

P/R Deduction (\$200.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1295.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Erie Indemnity Company PAC-Federal

Full Name (Last, First, Middle Initial)

A. Christopher J. Zimmer

Mailing Address 9262 HAMOT RD

City

WATERFORD

State

PA

Zip Code

16441-2738

FEC ID number of contributing
federal political committee.

C

Name of Employer

Erie Insurance Group

Occupation

SVP, Field Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

317.07

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2013

Transaction ID : PR39024244827

Amount of Each Receipt this Period

317.07

P/R Deduction (\$92.52 Monthly)

Full Name (Last, First, Middle Initial)

B. Karen A. Kraus Phillips

Mailing Address 611 VIRGINIA AVE

City

ERIE

State

PA

Zip Code

16505-4611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Erie Insurance Group

Occupation

VP, Corporate Marketing Svcs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.26

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2013

Transaction ID : PR39024494827

Amount of Each Receipt this Period

260.26

P/R Deduction (\$74.36 Monthly)

Full Name (Last, First, Middle Initial)

C. David C Katovich

Mailing Address 4325 STONE CREEK DR

City

ERIE

State

PA

Zip Code

16506-7041

FEC ID number of contributing
federal political committee.

C

Name of Employer

Erie Insurance Group

Occupation

VP, Life Undw & Product Admn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.79

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2013

Transaction ID : PR39024574827

Amount of Each Receipt this Period

208.79

P/R Deduction (\$61.44 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

786.12

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Erie Indemnity Company PAC-Federal

Full Name (Last, First, Middle Initial)

A. Jeffrey W. Brinling

Mailing Address 5603 STONERIDGE DR

City

FAIRVIEW

State

PA

Zip Code

16415-2243

FEC ID number of contributing
federal political committee.

C

Name of Employer

Erie Insurance Group

Occupation

SVP, Learning & Development

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.00

Date of Receipt

03 / 31 / 2013

Transaction ID : PR39025094827

Amount of Each Receipt this Period

343.00

P/R Deduction (\$98.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Christina M. Marsh

Mailing Address 245 GATEWAY DR

City

FAIRVIEW

State

PA

Zip Code

16415-1639

FEC ID number of contributing
federal political committee.

C

Name of Employer

Erie Insurance Group

Occupation

SVP, Services

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

03 / 31 / 2013

Transaction ID : PR39025164827

Amount of Each Receipt this Period

350.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Michael A Plazony

Mailing Address 5500 STONERIDGE DR

City

FAIRVIEW

State

PA

Zip Code

16415-2240

FEC ID number of contributing
federal political committee.

C

Name of Employer

Erie Insurance Group

Occupation

SVP, Life

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Date of Receipt

03 / 31 / 2013

Transaction ID : PR39025174827

Amount of Each Receipt this Period

364.00

P/R Deduction (\$104.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1057.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 17
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Erie Indemnity Company PAC-Federal

Full Name (Last, First, Middle Initial)

A. Lorianne Feltz-Upperman

Mailing Address 6418 FIELD VALLEY LN

City
FAIRVIEW

State Zip Code
PA 16415-1725

FEC ID number of contributing
federal political committee.

C

Name of Employer
Erie Insurance Group

Occupation
SVP, Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 31 / 2013

Transaction ID : PR39025184827

Amount of Each Receipt this Period

280.00

P/R Deduction (\$80.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Gregory J. Gutting

Mailing Address 529 SYBIL DR

City
ERIE

State Zip Code
PA 16505-2151

FEC ID number of contributing
federal political committee.

C

Name of Employer
Erie Insurance Group

Occupation
SVP, Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.99

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 31 / 2013

Transaction ID : PR39025224827

Amount of Each Receipt this Period

650.99

P/R Deduction (\$192.54 Monthly)

Full Name (Last, First, Middle Initial)

c. Ann H Zaprazny

Mailing Address 93 JACOBS CREEK DR

City
HERSHEY

State Zip Code
PA 17033-8915

FEC ID number of contributing
federal political committee.

C

Name of Employer
Erie Insurance Group

Occupation
SVP, Regional Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 31 / 2013

Transaction ID : PR39025374827

Amount of Each Receipt this Period

350.00

P/R Deduction (\$100.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1280.99

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Erie Indemnity Company PAC-Federal

Full Name (Last, First, Middle Initial)

A. Michael S. Zavasky

Mailing Address 4304 PRESTWICK DR

City State Zip Code
 ERIE PA 16506-3660

FEC ID number of contributing federal political committee.

C

Name of Employer

Erie Insurance Group

Occupation

EVP, Insurance Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2013

Transaction ID : PR39025414827

Amount of Each Receipt this Period

308.00

P/R Deduction (\$308.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Marcia A Dall

Mailing Address 4891 EQUESTRIAN DR

City State Zip Code
 ERIE PA 16506-6617

FEC ID number of contributing federal political committee.

C

Name of Employer

Erie Insurance Group

Occupation

EVP & Chief Financial Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1076.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2013

Transaction ID : PR39025424827

Amount of Each Receipt this Period

1076.95

P/R Deduction (\$307.70 Monthly)

Full Name (Last, First, Middle Initial)

C. John F Kearns

Mailing Address 5804 WIND CHIME LN

City State Zip Code
 FAIRVIEW PA 16415-3249

FEC ID number of contributing federal political committee.

C

Name of Employer

Erie Insurance Group

Occupation

EVP, Sales & Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1078.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
 03 31 2013

Transaction ID : PR39025434827

Amount of Each Receipt this Period

1078.00

P/R Deduction (\$308.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2462.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

Erie Indemnity Company PAC-Federal

Full Name (Last, First, Middle Initial)

A. Gregory C. Page

Mailing Address 8780 MARTHA WAY

City

WATERFORD

State

PA

Zip Code

16441-4066

FEC ID number of contributing
federal political committee.

C

Name of Employer

Erie Insurance Group

Occupation

VP & Regional Claims Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2013

Transaction ID : PR39025534827

Amount of Each Receipt this Period

210.00

P/R Deduction (\$60.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Patrick J. Burns

Mailing Address 8391 SUN LAKE DR

City

GIRARD

State

PA

Zip Code

16417-7013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Erie Insurance Group

Occupation

VP & Regional Claims Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2013

Transaction ID : PR39025544827

Amount of Each Receipt this Period

490.00

P/R Deduction (\$140.00 Monthly)

Full Name (Last, First, Middle Initial)

C. Matthew W. Myers

Mailing Address 6515 HONEY LN

City

ERIE

State

PA

Zip Code

16509-4879

FEC ID number of contributing
federal political committee.

C

Name of Employer

Erie Insurance Group

Occupation

SVP, Corporate Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2013

Transaction ID : PR39025554827

Amount of Each Receipt this Period

525.00

P/R Deduction (\$150.00 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

1225.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

Erie Indemnity Company PAC-Federal

Full Name (Last, First, Middle Initial)

A. Mark K. Banks

Mailing Address 5123 FLINTLOCK LN

City
ROANOKE

State Zip Code
VA 24018-8711

FEC ID number of contributing
federal political committee.

C

Name of Employer
Erie Insurance Group

Occupation
VP & Branch Manager IV

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2013

Transaction ID : PR39025724827

Amount of Each Receipt this Period

280.00

P/R Deduction (\$80.00 Monthly)

Full Name (Last, First, Middle Initial)

B. Andrew M Eрман

Mailing Address 3693 VOLKMAN RD

City
ERIE

State Zip Code
PA 16506-4767

FEC ID number of contributing
federal political committee.

C

Name of Employer
Erie Insurance Group

Occupation
VP & Chief Life Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2013

Transaction ID : PR42910804827

Amount of Each Receipt this Period

350.00

P/R Deduction (\$100.00 Monthly)

Full Name (Last, First, Middle Initial)

C. William N Herr Jr.

Mailing Address 3450 TANAGER DR

City
ERIE

State Zip Code
PA 16506-1156

FEC ID number of contributing
federal political committee.

C

Name of Employer
Erie Insurance Group

Occupation
VP, Corporate Actuarial

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

496.11

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2013

Transaction ID : PR43125484827

Amount of Each Receipt this Period

496.11

P/R Deduction (\$142.76 Monthly)

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1126.11

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Erie Indemnity Company PAC-Federal

Full Name (Last, First, Middle Initial)

A. Bradley G Postema

Mailing Address 5701 DOBLER RD

City

GIRARD

State

PA

Zip Code

16417-8768

FEC ID number of contributing
federal political committee.

C

Name of Employer

Erie Insurance Group

Occupation

SVP & Chief Investment Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.65

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2013

Transaction ID : PR44411594827

Amount of Each Receipt this Period

755.65

P/R Deduction (\$222.00 Monthly)

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

755.65

14803.84

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Erie Indemnity Company PAC-Federal

Full Name (Last, First, Middle Initial)

A. National Republican Congressional Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		25		2013

Mailing Address 320 First Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Transaction ID : 4666072

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00

5000.00